

P03000083752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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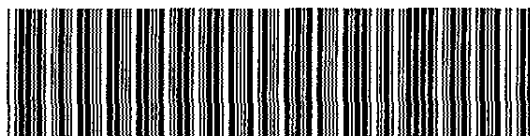
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF REGISTRATION

JS 103

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: In and Out Barber Shop, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Zachary K. Clemons

Name (Printed or typed)

2020 B South Adams Street

Address

Tallahassee, FL 32301

City, State & Zip

850-224-4422

Daytime Telephone number

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**NOTE: Please provide the original and one copy of the articles.**

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be:  
In and Out Barber Shop, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
2020 B South Adams Street  
Tallahassee, FI 32301

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Start New Business

### ARTICLE IV SHARES

The number of shares of stock is:  
One hundred share

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):  
Zachary K. Clemons, President  
2020 B South Adams Street  
Tallahassee, FI 32301

Demetria J. Clemons, Vice-Presdient  
812 Windward Ln  
Tallahassee, FI 32305

### ARTICLE VI REGISTERED AGENT


The name and Florida street address of the registered agent is:  
Zachary K. Clemons  
2020 B South Adams Street  
Tallahassee, FI 32301

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:  
Zachary K. Clemons  
2020 B South Adams Street  
Tallahassee, FI 32301

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

07/31/2003  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

07/31/2003  
\_\_\_\_\_  
Date

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STATE  
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